## PART B-ISSUE FEE TRANSMITTAL

Complete and mail this form, together with plicable fees, to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

## RECEIVED PATENT DEPT

AUG 0 8 2000

					1	
MAILING INSTRUCTIONS: This for through 4 should be completed where Receipt, the Patent, advance orders a correspondence address as indicated specifying a new correspondence admaintenance fee notifications.	appropriate. All further or and notification of mainter d unless corrected below ddress; and/or (b) indica	orrespondence includi lance fees will be mail or directed otherwise i ting a separate "FEE	ng the Issue Fe led to the currer in Block 1, by (a ADDRESS" f	Note: The certification mailings of the Iss for any other accordance assignment or form	te of mailing below and the fee Transmittal: This in panying papers. Each ac nal drawing, must have its  Certificate of Maili	certificate cannot be used ditional paper, such as an own certificate of mailing.
CURRENT CORRESPONDENCE ADDRESS	I hereby Aertify that the United States	it this Issue Fee Transmitt Postal Service with suffici	al is being deposited with			
		QM02/080	4 001 0	al analysis and beaution	e addressed to the Box Iss	ue Fee address above on
LARRY G CAIN CATERPILLAR I INTELLECTUAL		ARTMENT AE	6490 4 T		L. Mayernich	(Depositor's name)
100 N F ADAMS STREET					10 -0	•
PEORIA IL 616	Linda S. Mayerruck (Signature)					
	Y			9-2	<u>9-00 °                                  </u>	(Date)
APPLICATION NO.	FILING DATE	TOTAL CLAIMS		EXAMINER AND GROUP ART UNIT		DATE MAILED
09/167,444	10/06/98	011 LA	ZO, T		3745	08/04/00
First Named Applicant JARRETT,		35 USC	154(b)	term ext.	= 0 Days	S. P. E.
						TAADE WAS
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTIT	Y FEE DUE	DATE DUE
3 <del>9</del> 8-348	092-186.0	00 032	UTILIT	Y NO	\$1210.00	11/06/00
Use of PTO form(s) and Customer Number are recommended, but not required.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  (1) the name attorneys or the name of member a land the name of member a land the name of the nam				ng on the patent front page, list es of up to 3 registered patent r agents OR, alternatively, (2) of a single firm (having as a registered attorney or agent) nes of up to 2 registered patent r agents. If no name is listed, no e printed.  Larry G. Cain  2		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitue for filling an assignment.  (A) NAME OF ASSIGNEE  Caterpillar Inc.						
(B) RESIDENCE: (CITY & STATE OR COUNTRY) Peoria, IL				4b. The following fees or deficiency in these fees should be charged to:  DEPOSIT ACCOUNT NUMBER 03-1129		
Please check the appropriate assignee category indicated below (will not be printed on the patent)				(ENCLOSE AN EXTRA COPY OF THIS FORM)		
individual X: corporation or other private group entity Q government				X Issue Fee		
The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.						
(Authorized Signature)	1 A THADEIGATING 15 TEQ	(Date)	, I	producti identified 400	· · · · · · · · · · · · · · · · · · ·	
	/ \	[ ,]				

NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

10/03/2000 JBALINA2 00000050 031129 09167444

01 FC:142 1240.00 CH

## TRANSMIT THIS FORM WITH FEE